| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000   |  |   |              |                    |                                |                    |   |  |                        |    |                     |                        |
|--|--|---|--------------|--------------------|--------------------------------|--------------------|---|--|------------------------|----|---------------------|------------------------|
| CLAIMS AS FILED - PART I S<br>(Column 1) (Column 2) 1  |  |   |              |                    |                                |                    |   |  | mmy                    | OR | OTHER<br>SMALL      |                        |
| TOTAL CLAIMS   |  |   | 39           |                    |                                |                    |   | RATE   | FEE                    |    | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED |                    | NUMBER EXTRA                   |                    |   | Basic Fee  | 355.00                 | OR | BASIC FEE           | 710.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 39 minus 20= |                    | . 19                           |                    |   | X\$ 9=   |                        | OR | X\$18=              | 342.2                  |
| INDEPENDENT CLAIMS   |  |   | 7 minus 3 ∞  |                    | . 4                            |                    |   | X40=   |                        | OR | X80=                | 3200                   |
| MULTIPLE DEPENDENT CLAIM P   |  |   | RESENT       |                    |                                |                    |   | +135=  |                        | OR | +270≃               | 2                      |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |              |                    |                                |                    |   | TOTAL  |                        | OR | TOTAL               | 1372.0                 |
| Q 20 0/ICLAIMS AS AMENDED - PART II OTHER THA  |  |   |              |                    |                                |                    |   |  |                        |    |                     |                        |
| 9-   | (Column 1) (Column 2) (Column 3)               |   |              |                    |                                |                    |   | SMALL  | ENTITY                 | OR | SMALL               |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | PREVI              | HEST<br>HBER<br>OUSLY<br>FOR   | PRESENT<br>EXTRA   |   | RATE   | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total •  | 45  | Minus        | ٠. ر               | 39                             | = 6                |   | X\$ 9=   |                        | OR | X\$18=              | 108.00                 |
|  | Independent                                    | • 7                                       | Minus        | ***                | 7                              | =                  |   | X40=   |                        | OR | X80=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                    |                                |                    |   | .405-  |                        | "  | +270=               |                        |
|  |  |   |              |                    |                                |                    |   | +135≃<br>TOTAL                                   |                        | OR | TOTAL               | 108.00                 |
| 5.   | -30-06   | ADDIT. FEE                                | <u> </u>     | OR                 | ADDIT, FEE                     | 140.00             |   |  |                        |    |                     |                        |
| AMENDMENT B  |  | (Column 1) CLAIMS REMAINING               |              | HIG<br>NU          | IMN 2)<br>HEST<br>MBER         | (Column 3) PRESENT | 1 | DATE   | ADDI-<br>TIONAL        | 1  | RATE                | ADDI-<br>TIONAL        |
|  |  | AFTER<br>AMENDMENT                        |              |                    | OUSLY<br>FOR                   | EXTRA              |   | RATE   | FEE                    |    | HAIL                | FEE                    |
|  | Total  | . 52                                      | Minus        | •4                 | 5                              | -7,                |   | X\$ 9≖   |                        | OR | X\$18=              |                        |
|  | Independent                                    | . //                                      | Minus        | ***                | 1                              | <u> = (X</u>       |   | X40=   |                        | OR | X80=                |                        |
| Ľ  | FIRST PRESEN                                   | ITATION OF M                              | ULTIPLE DEP  | ENDEN              | TCLAIM                         |                    | J | +135=  |                        | OR | +270=               |                        |
|  |  |   |              |                    |                                |                    |   | TOTAL<br>ADDIT, FEE                              |                        | OR | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |              |                    |                                |                    |   |  |                        |    |                     |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIG<br>NUI<br>PREV | HEST<br>MBER<br>HOUSLY<br>OFOR | PRESENT<br>EXTRA   |   | RATE   | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •   | Minus        |                    |                                | -                  |   | X\$ 9=   |                        | OR | X\$18=              | î                      |
|  | Independent                                    | •   | Minus        | ***                |                                | =                  |   | X40=   | -                      | 1  | Von                 |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                    |                                |                    |   | <del>                                     </del> | <del> </del>           | OR |                     | <b></b>                |
| +135= OR +270=   |  |   |              |                    |                                |                    |   |  |                        |    |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |              |                    |                                |                    |   |  |                        |    |                     |                        |